

## Massachusetts v5 Record Layout

Element Name	Data Type	Length	Comments
<b>Vendor Identification &amp; Software Instructions</b>			
Delimiter	^		
Vendor XXX ID Number	X	10 max	
Software Version #.# Software ID Number	X	5 max	
Vendor & Software Identification Number	X	15 max	
<b>Incident File Header Record Type 1000</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1000	N	5	
Transaction Type	C	1	
Fire Department Station	X	3	
NFIRS Version	F	2.2	
<b>Basic Incident Record Type 1005</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1005	N	5	
Transaction Type	C	1	
Incident Type	C	4	
Address on Wildland Flag	Y	1	
Aid Given or Received	Y	1	
Alarm Date and Time	N	12	
Arrival Date and Time	N	12	
Controlled Date and Time	N	12	
Last Unit Cleared Date and Time	N	12	
Shift	X	1	
Alarms	X	2	
District	X	3	
Actions Taken	C	3	max of 3
Resource Form Used Flag	Y	1	
Suppression Aparatus	N	4	
EMS Apparatus	N	4	
Other Apparatus	N	4	
Suppression Personnel	N	4	
EMS Personnel	N	4	
Other Personnel	N	4	
Resources Include Mutual Aid Flag	Y	1	
Property Loss	N	9	
Contents Loss	N	9	
Property Value	N	9	
Contents Value	N	9	
Fire Service Deaths	N	3	
Other Deaths	N	3	

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## Massachusetts v5 Record Layout

Element Name	Data Type	Length	Comments
Fire Service Injuries	N	3	
Other Injuries	N	3	
Detector Alerted Occupants	C	2	
Hazardous Material Released	C	2	
Mixed Use	C	3	
Property Use	C	4	
<b>Incident Address Record Type 1010</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1010	N	5	
Transaction Type	C	1	
Census Tract	X	6	
Location Type	C	1	
Street Number or Milepost	X	8	
Street Prefix	C	2	
Street or Highway Name	X	30	
Street Type	C	4	
Street Suffix	C	2	
Apartment Number	X	15	
City	X	20	
State	C	2	
Zip	N	9	
Cross Street Directions	X	30	
<b>Incident Aid Given or Received Record Type 1020</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1020	N	5	
Transaction Type	C	1	
FDID Receiving Aid	X	5	
FDID State Receiving Aid	C	2	
Incident Number of FDID Receiving Aid	N	7	
<b>Officer in Charge Record Type 1030</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1030	N	5	
Transaction Type	C	1	
Authority Personnel ID	X	9	
Authority First Name	X	15	

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## Massachusetts v5 Record Layout

Element Name	Data Type	Length	Comments
Authority Middle Initial	X	1	
Authority Last Name	X	25	
Authority Rank	X	10	
Authority Assignment	X	10	
Authority Date	N	8	
<b>Member Making Report Record Type 1035</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1035	N	5	
Transaction Type	C	1	
Authority Personnel ID	X	9	
Authority First Name	X	15	
Authority Middle Initial	X	1	
Authority Last Name	X	25	
Authority Rank	X	10	
Authority Assignment	X	10	
Authority Date	N	8	
<b>Incident Remarks Record Type 1040</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1040	N	5	
Transaction Type	C	1	
Remarks	X	25	
<b>Incident Person(s) Involved Record Type 1050</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1050	N	5	
Transaction Type	C	1	
Person Sequence Number	N	3	one based
Name Prefix	C	3	
First Name	X	15	
Middle Initials	X	1	
Last Name	X	25	
Name Suffix	X	4	
Business Name	X	25	
Phone	N	10	
Street Number or Milepost	X	8	
Street Prefix	C	2	

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Element Name	Data Type	Length	Comments
Street or Highway Name	X	30	
Street Type	C	4	
Street Suffix	C	2	
Post Office Box	X	10	
Apartment Number	X	15	
City	X	20	
State	C	2	
Zip	N	9	
<b>Owner Record Type 1055</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1055	N	5	
Transaction Type	C	1	
Name Prefix	C	3	
First Name	X	15	
Middle Initials	X	1	
Last Name	X	25	
Name Suffix	X	4	
Business Name	X	25	
Phone	N	10	
Street Number or Milepost	X	8	
Street Prefix	C	2	
Street or Highway Name	X	30	
Street Type	C	4	
Street Suffix	C	2	
Post Office Box	X	10	
Apartment Number	X	15	
City	X	20	
State	C	2	
Zip	N	9	
<b>Incident Special Study Record Type 1060</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1060	N	5	
Transaction Type	C	1	
Special Study Seq. Number	N	3	zero based
Special Study Identification Number	N	5	
Special Study Code	C	5	
<b>Fire Record Type 1100</b>			
Fire Dept. ID (FDID)	N	5	

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Element Name	Data Type	Length	Comments
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1100	N	5	
Transaction Type	C	1	
Number of Residential Units	N	4	
Not Residential Flag	Y	1	
Number of Buildings Involved	N	3	
Acres Burned	N	6	
Less than one Acre	Y	1	
On site Materials	C	4	max of 3
Material Storage Use	C	2	
Area of Origin	C	3	
Heat Source	C	3	
Item First Ignited	C	3	
Confined to Origin	Y	1	
Type of Material	C	3	
Cause of Ignition	C	2	
Contributed to Ignition Factor	C	3	max of 2
Human Factors	C	2	max of 7
Age of Person	F	3.2	
Sex of Person	A	1	
Equipment Involved	C	4	
Mobile Property Involved	C	2	
Suppression Factors	C	4	max of 3
<b>Mobile Property Record Type 1120</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1120	N	5	
Transaction Type	C	1	
Mobile Property Type	C	3	
Mobile Property Make	C	3	
Mobile Property Model	X	25	
Mobile Property Year	N	4	4 digit year only
Mobile Property License Plate	X	10	
Mobile Property State	C	2	
Mobile Property VIN Number	X	17	
<b>Equipment Involved record Type 1130</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1130	N	5	

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Element Name	Data Type	Length	Comments
Transaction Type	C	1	
Equipment Brand	X	25	
Equipment Model	X	25	
Equipment Serial Number	X	25	
Equipment Year	N	4	4 digit year only
Equipment Power	C	3	
Equipment Portability	C	2	
<b>Structure Fires Record Type 1200</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1200	N	5	
Transaction Type	C	1	
Structure type	C	2	
Structure Status	C	2	
Building Height: Stories Above Grade	N	3	
Building Height: Stories Below Grade	N	2	
Building Length	N	4	
Building Width	N	4	
Total Square Feet	N	8	
Fire Origin	N	3	+ or -
Fire Spread	C	2	
Number of Stories with Damage: Minor	N	3	
Number of Stories with Damage: Significant	N	3	
Number of Stories with Damage: Heavy	N	3	
Number of Stories with Damage: Extreme	N	3	
No Flame Spread/Same as First/Unknown	Y	1	
Items Contributing to Spread	C	3	
Type of Material Contributing to Spread	C	3	
Detector Presence	C	2	
Detector Type	C	2	
Detector Power	C	2	
Detector Operation	C	2	
Detector Effectiveness	C	2	
Detector Failure Reason	C	2	
AES Presence	C	2	
AES type	C	2	
AES Operation	C	2	
Number of Sprinklers Operating	N	3	
AES Failure Reason	C	2	
<b>Wildland Transaction Record Type 1300</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based

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Element Name	Data Type	Length	Comments
Record Type 1300	N	5	
Transaction Type	C	1	
Latitude	F	2.2	
Longitude	F	3.2	
Township	F	2.1	
North/South	C	1	
Range	N	3	
East/West	C	1	
Section	N	2	
Subsection	C	4	
Meridian	N	2	
Area type	C	2	
Wildland Fire Cause	C	2	
Human Factors Contributing	C	2	max of 8
Factors Contributing to Ignition Factors	C	3	max of 2
Fire Suppression Factors	C	4	max of 3
Heat Source	C	3	
Mobile Property Type	C	3	
Equipment Involved In Ignition	C	4	
NFDRS Weather Station ID	A	6	
Weather Type	C	3	
Wind Direction	C	2	
Wind Speed	N	3	
Air Temperature	N	3	+ or -
Relative Humidity	N	3	
Fuel Moisture	N	2	
Fire Danger Rating	C	2	
Number of Buildings Involved	N	3	
Number of Buildings Threatened	N	3	
Total Acres Burned	F	9.1	
Primary Crop Burned 1	X	25	
Primary Crop Burned 2	X	25	
Primary Crop Burned 3	X	25	
Undetermined Acres Burned %	N	3	
Tax Paying Acres Burned %	N	3	
Non-Tax Paying Acres Burned %	N	3	
City,Town,village,local Acres Burned %	N	3	
County or parish Acres Burned %	N	3	
State or Province Acres Burned %	N	3	
Federal Acres Burned %	N	3	
Foreign Acres Burned %	N	3	
Military Acres Burned %	N	3	
Other Acres Burned %	N	3	
Property Management Ownership	C	2	
Federal Agency Code	X	5	
NFDRSF Fuel Model at Origin	C	3	
Person Responsible for Fire	C	2	
Gender	C	1	
Age	F	3.2	
Activity of Person	C	3	

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## Massachusetts v5 Record Layout

Element Name	Data Type	Length	Comments
Horizontal Distance from ROW	N	3	
Type of ROW	C	4	
Elevation	N	5	
Relative Position on Slope	C	2	
Aspect	C	2	
Flame Length	N	2	
Rate of Spread	N	3	

### Civilian Fire Incident Record Type 1400

Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1400	N	5	
Transaction Type	C	1	
Civilian Fire Casualty Sequence Number	N	3	one based
First Name	X	15	
Middle Initial	X	1	
Last Name	X	25	
Name Suffix	X	3	
Gender	C	1	
Age	F	3.2	
Race	C	2	
Ethnicity	C	2	
Affiliation	C	2	
Injury Date and Time	N	12	
Severity	C	2	
Cause of Injury	C	2	
Human Factors	C	2	
Contributing Factors	C	3	max of 8
Activity when Injured	C	2	max of 3
Location at Time of Incident	C	2	
General Location at Time of Injury	C	2	
Story at start of Incident	N	3	+ or -
Story when Injury Occured	N	3	+ or -
Specific Location at Time of Injury	C	3	
Primary Apparent Symptoms	C	3	
Primary Part of Body Injured	C	2	
Disposition	C	2	

### Fire Service Record Type 1500

Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1500	N	5	

Data Types: C = Coded Field; Y = Flag; N = Numeric; X = Text



## Massachusetts v5 Record Layout

Element Name	Data Type	Length	Comments
Transaction Type	C	1	
Fire Service Casualty Sequence Number	N	3	one based
Firefighter Identification Number	A	9	
First Name	X	15	
Middle Initials	X	1	
Last Name	X	25	
Name Suffix	X	3	
Gender	C	1	
Career	C	2	
Age	N	3	
Injury Date and Time	N	12	
Responses	N	2	
Usual Assignment	C	2	
Physical Condition	C	2	
Severity	C	2	
Taken To	C	2	
Activity at Time of Injury	C	3	
Primary Apparent Symptom	C	3	
Primary Area of Body Injured	C	3	
Cause of Firefighter Injury	C	3	
Factor Contributing to Injury	C	3	
Object Involved In Injury	C	3	
Where Injury Occured	C	2	
Injury Relation to Structure	C	2	
Story of Injury	N	3	+ or -
Specific Location	C	3	
Vehicle Type	C	2	
Protective Equipment Contributed to Injury	C	2	
<b>Fire Service Equipment Failure Record Type 1510</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1510	N	5	
Transaction Type	C	1	
Fire Service Casualty Sequence Number	N	3	one based
Equipment Failure Sequence Number	N	3	one based
Equipment Item	C	3	
Equipment Problem	C	3	
Equipment Manufacturer	X	12	
Equipment Model	X	12	
Equipment Serial Number	X	12	
<b>Ems Module Record Type 1600</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	

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## Massachusetts v5 Record Layout

Element Name	Data Type	Length	Comments
Exposure Number (exp)	N	3	zero based
Record Type 1600	N	5	
Transaction Type	C	1	
EMS Patient Sequence Number	N	3	one based
Arrived At Patient Date & time	N	12	
Patient Transfer Date & Time	N	12	
Provider Impression/Assessment	C	3	
Age	F	3.2	
Gender	C	1	
Race	C	2	
Ethnicity	C	2	
Human Factors	C	2	max of 8
Other Factors	C	2	
Body sites of Injury	C	2	max of 5
Injury Types	C	3	
Cause of Illness/Injury	C	3	
Procedures Used	C	3	max of 25
Safety Equipment Used	C	2	max of 8
Pre or Post Arrival Arrest	C	2	
Pre-Arrival Arrest Descriptors	C	2	max of 2
Initial Arrest Rhythm	C	2	
Initial Level of Care	C	2	
Highest Level of Care	C	2	
Patient Status	C	2	
Pulse on Transfer	C	2	
Disposition	C	2	
<b>HazMat Module Record Type 1700</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1700	N	5	
Transaction Type	C	1	
Released From	C	2	
Story of Release	N	3	+ or -
Population Density	C	2	
Area Affected Measurement	N	4	
Area Affected Units	C	2	
Area Evacuated measurement	N	4	
Area Evacuated Units	C	2	
Estimated Number of People Evacuated	N	6	
Estimated Number of Buildings Evacuated	N	4	
HazMat Action Taken	C	3	max of 3
Occurred First	C	2	
Cause of Release	C	2	
Factors Contributing to Release	C	3	max of 3
Mitigating Factors	C	3	max of 3
Equipment Involved in Release	C	4	

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## Massachusetts v5 Record Layout

Element Name	Data Type	Length	Comments
Disposition	C	2	
HazMat Civilian Deaths	N	4	
HazMat Civilian Injuries	N	4	
<b>HazMat Chemical Transaction Record Type 1710</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1710	N	5	
Transaction Type	C	1	
HazMat Chemical Sequence Number	N	3	one based
UN Number	X	4	
DOT Hazard classification	C	3	
CAS Registration	X	10	
Chemical Name	X	50	
Container Type	C	3	
Estimated Container Capacity	N	9	
Capacity Units	C	3	
Estimated Amount Released	N	9	
Released Units	C	3	
Physical State When Released	C	2	
Released Into	C	2	
<b>HazMat Mobile Property Type Record Type 1720</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1720	N	5	
Transaction Type	C	1	
Mobile Property Type	C	3	
Mobile Property Make	C	3	
Mobile Property Model	X	25	
Mobile Property Year	N	4	4 digit year only
Mobile Property License Plate	X	10	
Mobile Property State	C	2	
Mobile Property VIN Number	X	17	
<b>HazMat Material Equipment Record Type 1730</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1730	N	5	
Transaction Type	C	1	
Equipment Brand	X	25	

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## Massachusetts v5 Record Layout

Element Name	Data Type	Length	Comments
Equipment Model	X	25	
Equipment Serial Number	X	25	
Equipment Year	N	4	4 digit year
<b>Arson Record Type 1900</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1900	N	5	
Transaction Type	C	1	
Case Status	C	2	
Availability of Material First Ignited	C	2	
Suspected Motivation Factors	C	3	max of 4
Apparent Group Involvement	C	2	max of 4
Entry Method	C	3	
Extend of Fire Involvement on Arrival	C	2	
Incendiary Devices: Container	C	3	
Incendiary Devices: Ignition/Delay Device	C	3	
Incendiary Devices: Fuel	C	3	
Other Investigative Information	C	2	max of 4
Property Ownership	C	2	max of 8
Initial Observations	C	2	max of 6
Laboratory Used	C	2	
<b>Arson Agency Referral Record Type 1910</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1910	N	5	
Transaction Type	C	1	
Agency Name	X	30	
Agency Street Number	X	8	
Agency Street Prefix	C	2	
Agency Street or Highway	X	30	
Agency Street Type	C	4	
Agency Street Suffix	C	2	
Agency Apartment Number	X	15	
Agency City	X	20	
Agency State	C	2	
Agency Zip Code	N	9	
Agency Phone Number	N	10	
Agency Case Number	N	12	
Agency ORI	X	5	
Agency FID	X	2	
Agency FDID	N	5	

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## Massachusetts v5 Record Layout

Element Name	Data Type	Length	Comments
<b>Arson Juvenile Record Type 1920</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 1920	N	5	
Transaction Type	C	1	
Subject Sequence Number	N	3	one based
Age	N	3	
Gender	C	2	
Race	C	2	
Ethnicity	C	2	
Family Type	C	2	
Motivation/Risk Factors	C	2	max of 8
Disposition	C	2	
<b>Fire Department Header Record Type 2000</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Record Type 2000	N	5	
Transaction Type	C	1	
Fire Department Name	X	30	
Fire Department Street Number or Milepost	X	8	
Fire Department Street Prefix	C	2	
Fire Department Street or Highway Name	X	30	
Fire Department Street Type	C	4	
Fire Department Street Suffix	C	2	
Fire Department City	X	20	
Fire Department Zip Code	N	9	
Fire Department Phone Number	N	10	
Fire Department Fax	N	10	
Fire Department E-mail	X	45	
Fire Department FIPS County Code	X	3	
Number of stations	N	3	
Number of Paid Firefighters	N	4	
Number of Volunteer Firefighters	N	4	
Number of Volunteer Paid Per Call	N	4	
<b>Unique to Massachusetts Elements Record Type 8000</b>			
Fire Dept. ID (FDID)	N	5	
Fire Dept. State (MA)	C	2	
Alarm Date	N	8	
Incident Number (inc)	N	7	
Exposure Number (exp)	N	3	zero based
Record Type 8000	N	5	
Transaction Type	C	1	
Critical Incident	C	1	Y or N
Team Mobilized	C	1	Y or N
Circumstances	C	1	max of 3

Data Types: C = Coded Field; Y = Flag; N = Numeric; X = Text

## Massachusetts v5 Record Layout

Element Name	Data Type	Length	Comments
Insurance Company	X	25	
Total Insurance	N	10	
Car Stolen	C	1	Y or N
Tier Level	C	2	
Number of Entries	N	3	
Suit/PPE Level	C	2	